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Rev. 6/93U.S. Department of Commerce
Patent and Trademark OfficeDECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing

Attorney Docket Number	920333.90019
First Named Inventor	Adrien R. Beaudoin et al.
<i>COMPLETE IF KNOWN</i>	
Application Number	
Filing Date	Filed Herewith
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.
I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ATP-Diphosphohydrolases, Process of Purification Thereof and
Process of Producing Thereof by Recombinant Technology

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
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Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
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Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION

I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT International application designating the United States of America, listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
08/419,204	PCT/CA96/00223	04/10/1995 04/10/1996 02/01/1998	
08/930,921			

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name
OR

Quarles & Brady LLP

Customer or label Number



26710

PATENT TRADEMARK OFFICE

List attorney(s) and/or agent(s) name and registration number below

Name	Registration Number	Name	Registration Number

<input type="checkbox"/> Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto	
Please direct all correspondence to <input checked="" type="checkbox"/> Customer Number	<input type="checkbox"/> Fill in correspondence

Name	26710		
Address	PATENT TRADEMARK OFFICE		
Address			
City			
Country			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:	Given Name	Adrien	Middle Initial	R.	Family Name	Beaudoin	Suffix e.g. Jr.
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Inventor's Signature	Date
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Residence:	Rock Forest	State	Country	Canada	Citizenship	Canada
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Additional inventors are being named on supplemental sheet(s) attached hereto

09/24/96 - D.E.P.C.T.

Please type a plus sign (+) inside this box

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name	Jean		Middle Initial	Family Name	Sevigny			Suffix e.g. Jr.		
Inventor's Signature							Date			
Residence:	Brookline			State	MA	Country	US	Citizenship	Canada	
Post Office										
Post Office	185 Freeman Street Apt. 448									
City	Brookline	State	MA	Zip	02446	Country	US	Applicant Authority		
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name	Fritz		Middle Initial	H.	Family Name	Bach			Suffix e.g. Jr.	
Inventor's Signature							Date			
Residence:	Boston			State	MA	Country	US	Citizenship	US	
Post Office										
Post Office	8 Blossom Lane Manchester-By-The-Sea									
City	Boston	State	MA	Zip	01966	Country	US	Applicant Authority		
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name	Simon		Middle Initial		Family Name	Robson			Suffix e.g. Jr.	
Inventor's Signature							Date			
Residence:	Weston			State	MA	Country	US	Citizenship	GB	
Post Office										
Post Office	250 Glen Road									
City	Weston	State	MA	Zip	02493	Country	US	Applicant Authority		
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature							Date			
Residence				State		Country			Citizenship	
Post Office										
Post Office										
City				State	Zip	Country			Applicant Authority	
Additional inventors are being named on supplemental sheet(s) attached hereto										